Encephalitis is a generic term and can be caused by numerous viral and non-viral agents. In common parlance, however, Japanese [Encephalitis has been associated with encephalitis outbreaks. There has been no such death due to Japanese Encephalitis in Delhi in recent years. However, deaths due to all types of encephalitis in Delhi during 1986 were reported to be 180.

The remidial measures include proper case management through immediate hospitalisation and appropriate treatment. For control/spread of Japanese Encephalitis, insecticidal spray with DDT/BHC and fogging operations are being undertaken.

Punctuality of Air India and Indian Airlines fights

935. SHRI M. KADHARSHA: Will the Minister of CIVIL AVIATION be pleased to state:

(a) the number of times the Air India and Indian Airlines flights reached late at their destinations together with reasons during the last one year; and

(b) what steps Government have taken or propose to take to bring punctuality in two airlines?

THE MINISTER OF STATE OF THE MINISTRY OF CIVIL AVIATION (SHRI JAGDISH TYTLER): (a) During 1986, out of 14, 142 flights, 1, 545 flights of Air India and out of 1, 12, 817 flights, 26, 229 flights of Indian Airlines were delayed. Majority of the flights were delayed due to reasons such as adverse weather conditions, non-availability of airport facilities, consequential delays, etc. In the case of Air India, factors like customs, airport clearance and immigration, etc. also resulted in delay.

(b) All cases of delays are individually investigated by the Airlines, causes for delays established and responsibility fixed, in the case of any negligence. Snag$_s$ of repetitive nature and problem areas are diagnosed for 'corrective action with a view to avoiding recurrence.

Registration of non-oyt general category under Rajpath Exchange

936. SHRI RAFIQUE ALAM: Will the Minister of COMMUNICATIONS be pleased to state:

(a) the number of persons regis tered under Non-OYT General Category under Rajpath Exchange 33 level as on May, 1986;

(b) the number of connections released from that exchange from May, 1986 to February, 1987, under above mentioned category; and

(c) the number of connections likely to be released during the current year from Rajpath exchange under Non-OYT-General Category?

THE MINISTER OF STATE IN THE MINISTRY OF COMMUNICATIONS (SHRI SANTOSH MOHAN DEV): (a) 754 persons are registered under Non-OYT-General Category under Rajpath Exchange as on 1-5-1986.

(b) 21 telephone connections were released from 2-5-1986 to 23^-1987 in Rajpath telephone exchange under Non-OYT-General Category.

(c) No bulk release of new telephone cennections in Rajpath telephone exchange is expected during the current year.

Pack insertion with medicines

937 SHRI RAFIQUE ALAM: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state.

(a) whether Government are aware that most of the drug companies do not provide pack insert along with the medicines;

(b) whether it is also a factthat certain medicines have seriousside effects and prove dangerous ncase the precautions required areno taken;

(c) if so, the names of such drugs which came to the notice of Government recently where cautionary notes have not been provided along with medicines; and

(d) the action taken against them?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) The Drugs and Costmetics Rules do not contain specific provision requiring manufacturer to include package in-sert in the packages on medicines;

Ob) Most of the drugs are double-edged weapons and, therefore, if not used judiciously can produce side-effects ranging from mild to serious ones.

(c) and (d) Government from time to time based on epidemiological data from abroad or action taken by developed countries and is consultation wife experts, advise the manu-facturers through the State Licensing Authorities to include special warning and precautionary statement with respect to drugs as and when it is deemed necessary. It is also monitored that whether such directions are complied with or not. Recently, based on such a monitories, it has been brough to the notice of the Government that while majority of the manufacturers are giving necessary warning statement against the indiscriminate use of formulations containing Dextropropoxyphene, some manufacturers, however, have failed as yet to comply with the similar direc+ions. On receipt of this information the Drugs Controller (India) has directly taken up the matter with the defeu'lting manufacturers asking them to comply the directions imme-diately and also to show reasons for non-com liance.

Diarrnoeol and sexually transmitted disease control programme

938. SHRI RAFIQUE -ALAM: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether diarrhoeal and setcual-ly transmitted diseases control programmes are covered under National Health Programme;

Ob) if so, what steps have taken to control these diseases and the names of the drugs used for controlling each disease;

(c) whether these drugs are produced in the country or being imported;

(d) the names of the drugs purchased by Government during the last two years;

(e) what is the estimated requirement for these drugs for Seventh Five Year Plan under the programme;.

(f) whether it is a fact that there are a number of other drugs used tor controlling these diseases which Government are not purchasing; and

(g) if so, the names of those drugs and the combination of drugs and what are the reasons for non purchase?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) Yes.

(b) Diarrhoeal Diseases Control Programme:

The Programme uses a three-tier approach viz; the use of Home Available fluids by the mother for mild-cases of diarrhoea, the use of oral Rehydration Solution by the multipurpose workers for moderately dehydrated cases and intensive rehydration therapy in health institutions for severely dehydrated cases. The National Institute of Cholera and Enteric Diseases, Calcutta assists in research and training programme.